SOFTWOOD LUMBER BOARD

SOFTWOOD LUMBER RESEARCH, PROMOTION, CONSUMER EDUCATION AND INDUSTRY INFORMATION ORDER

BALLOT—	(specify region)
INSTRUCTIONS:	
The nominees listed on this ballot are seeking (a large/small) Lumber Board (Board) representing the Region. Th	± •
Large means manufacturers for the U.S. market who account volume of assessable softwood lumber and small means those of the total annual volume of assessable softwood lumber.	<u> </u>
If your company operates in more than one region you may choose the region in which you cast a vote, but you may vote in no more than one region. Appropriate ballot(s) have been provided in this package. If there's any question please call 202-463-4705. Submit no more than one ballot .	
Please complete ballot AND certification statement and penclosed, self-addressed envelope. Ballots must be submitted by mail. Do not fax or email to postmarked on or before (date). Ballots postmarked after	the ballot. Ballots must be

The making of any false statement or representation on this form, knowing it to be false, is a violation of Title 18, Section 1001 United States Code, which provides for the penalty of a fine of \$10,000 or imprisonment of not more than five years, or both.

NOTE: The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 522a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting this information to be supplied on this form is from the applicable commodity legislation for research and promotion programs. Furnishing the requested information is necessary for the administration of this program. Submission of Tax Identification Number (TIN) or importer identification number is mandatory and will be used to determine affiliation or entity identity.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0093. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: 1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; 2) fax: (202) 690-7442; or 3) email: program.intake@usda.gov.

USDA is an equal opportunity provider, employer, and lender.

	SOFTWOOD LUMBER BOARD
BAL	LOT – REGION – (LARGE/SMALL COMPANY SEAT)
Choose	(#) candidates only.
	CANDIDATES
[]	Name, company, state/province
[]	Name, company, state/province
[]	Name, company, state/province
[]	(Write in)
	Print Candidate Name
PLEASE B	E SURE TO COMPLETE THE FOLLOWING CERTIFICATION STATEMENT:
-	at I domestically manufactured and shipped within the United States or imported to the
	es a minimum of 15 million board feet of softwood lumber during the twelve-month
-	ate) through (date) and that I manufactured and domestically shipped or imported softwood
iumber fron	n the Region:

Submission of Ballot to Board

Once you have completed and signed this ballot please place this ballot in the enclosed, self-addressed envelope and mail it to the Board. **Ballots may not be counted if incomplete. Ballots postmarked after**

Signature:

Company/Entity:____

Print Name:

(date) will not be counted.

RETURN BALLOT TO: (ADDRESS)

SLB – XXX (20xx) X Company

SWL-BAL (rev. 03/17) Destroy previous edition.